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FEC FORM 3

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## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECULT OF SERVICE PUBLIC RECORDS

13 OCT 22 AM 10: 49

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NAME OF TOOMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, type over the lines.	r- <del>new</del> r-v - v	o dad Grilly
Americans for Doug Truax				
ADDRESS (number and street)	PO Box 4808			
Applicas (nomber and street)				
Check if different than previously reported. (ACC)	Oak Brook	<del></del>	IL 6052	2
2. FEC IDENTIFICATION NUM	BER ▼CIT	<u> </u>	STATE A	ZIP CODE
C/ C00546457	3. IS THE		AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose  (a) Quarterly Reports:  April 15 Quarterly Reports:	oort (Q1)	Primary (12P)  Convention (12C)	General (12G) Special (12S)	Runoff (12R)
July 15 Quarterly Rep	D+ (OO)	ion on		in the State of
January 31 Year-End	Report (YE) (c) 30-Da	POST-Election Report for General (30G)	the: Runoff (30R)	Special (30S)
Termination Report (TI	•	ion on		in the State of
5. Covering Period $\begin{bmatrix} M & M \\ 03 \end{bmatrix} / \begin{bmatrix} D & D \\ 01 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2013 \end{bmatrix}$ through $\begin{bmatrix} M & M \\ 09 \end{bmatrix} / \begin{bmatrix} D & D \\ 30 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2013 \end{bmatrix}$				
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  Sherry Gaskill				
Signature of Treasurer Sherry C	Gaskill .		Date 10	10   Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.				
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